



HAWAII STATE ETHICS COMMISSION ORGANIZATION'S OR INDIVIDUAL'S EXPENDITURES AND CONTRIBUTIONS REPORT

FORM ORG

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(To be filed by organizations, employing organizations and individuals
other than registered lobbyists)

HAWAII STATE ETHICS COMMISSION
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STATE OF HAWAII
ETHICS COMMISSION

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For lobbying reporting period:

☒ January 1 - last day of February

☐ March 1 - April 30

☐ May 1 - December 31

Year of Report 20 05

Contact person

Raynard Soon, VP CR/C Div. Phone 523-6200

Organization

Kamehameha Schools

Mailing address

567 South King Street, Suite 400
Honolulu, HI 96813

PART I. TOTAL EXPENDITURES

The total sum or value of all expenditures for the purpose of lobbying during the statement
period was: \$ 4,409.57

EXPENDITURES

Category	Total Amount	Category	Total Amount
1. Preparation & distribution of lobbying materials		7. Entertainment	
2. Media advertising		8. Food & beverages	\$151.39
3. Telegraph, telephone and other forms of telecommunication		9. Gifts	
4. Postage		10. Loans	
5. Compensation paid to lobbyists	\$4,258.18	11. Other disbursements	
6. Fees (other than to lobbyists)		TOTAL EXPENDITURES	\$4,409.57

COMPENSATION PAID TO LOBBYISTS

List in this section the names of all lobbyists and compensation paid to the lobbyists during the statement period.

Name	Address	Compensation paid
Linda O'Day	567 S. King St., #400 Hon., HI 96813	\$2,549.96
Jon Okudara	99-1362 Palaiialii Place Aiea, HI 96701	\$1,708.22

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EXPENDITURES OF \$25 OR MORE PER PERSON PER DAY

List in this section all expenditures incurred for the purpose of lobbying of \$25 or more per person per day during the statement period.

☐ This section is not applicable

☒ Expenditures incurred in the total sum of \$25 or more per person per day were made for the following persons:

Name & Address	Amount or value
Rep. Robert Herkes - State Capitol, Rm. 419, Hon., HI 96813	\$29.52
Rep. Barbara Marumoto - State Capitol, Rm. 304 Hon., HI 96813	\$27.18
Rep. Ken Ito - State Capitol, Rm. 420, Hon., HI 96813	\$34.43
Sen. Norman Sakamoto - State Capitol, Rm. 230, Hon., HI 96813	\$34.43
Sen. Pres. Robert Bunda - State Capitol, Rm. 003, Hon., HI 96813	\$25.83

AGGREGATE EXPENDITURES OF \$150 OR MORE PER PERSON

List in this section all expenditures incurred for the purpose of lobbying in the total sum of \$150 or more per person during the statement period.

☒ This section is not applicable

☐ Expenditures incurred in the aggregate of \$150 or more per person were made for the following persons:

Name & Address	Amount or value

PART II. CONTRIBUTIONS RECEIVED

List in this section all contributions received for the purpose of lobbying in the total sum of \$25 or more per person during the statement period.

☒ This section is not applicable

☐ Contributions received in the total sum of \$25 or more per person were received from the following persons:

Name & Address	Amount or value

PART III. SUBJECT AREAS OF LOBBYING

Legislative and/or administrative action in the following areas was supported or opposed during the statement period:

- | | | | |
|--|---|---|--|
| <input checked="" type="checkbox"/> Agriculture | <input checked="" type="checkbox"/> Education | <input checked="" type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input checked="" type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input checked="" type="checkbox"/> Hawaiian Affairs | <input checked="" type="checkbox"/> Labor & Employment | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Culture, Arts, Historic Preservation | <input checked="" type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input checked="" type="checkbox"/> Housing | <input checked="" type="checkbox"/> Public Safety & Corrections | |

I hereby certify that the statements made above are correct and complete to the best of my knowledge

(Signature of authorized person)

(Date)

Name of authorized person (type or print)

Title of authorized person